

NOV 29 2005

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  |  | Docket Number: CM03228J |
|---|--|-------------------------|
| In re Application of  | Shahriar Emami   |                         |
| Application Number  | 09/626,551   | Filed July 27, 2000     |
| For   | TEXT COMP[RESSION METHOD AND APPARATUS   |                         |
| Group Art Unit  | 2819   | Examiner Khai M. Nguyen |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.  |  |                         |
| The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):   |  |                         |
| <input checked="" type="checkbox"/>   | One Month (37 CFR 1.17(a)(1))  | \$ 120.00 \$120.00      |
| <input type="checkbox"/>  | Two Months (37 CFR 1.17(a)(2))   | \$ 450.00               |
| <input type="checkbox"/>  | Three Months (37 CFR 1.17(a)(3))   | \$ 1020.00              |
| <input type="checkbox"/>  | Four Months (37 CFR 1.17(a)(4))  | \$ 1590.00              |
| <input type="checkbox"/>  | Five Months (37 CFR 1.17(a)(5))  | \$ 2160.00              |
| <input type="checkbox"/>  | Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ |                         |
| <input type="checkbox"/>  | A check in the amount of the fee is enclosed.  |                         |
| <input type="checkbox"/>  | Payment by credit card. Form PTO-2038 is attached.   |                         |
| <input checked="" type="checkbox"/>   | The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  |                         |
| <input checked="" type="checkbox"/>   | The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 502117.   |                         |
| <input checked="" type="checkbox"/>   | I have enclosed a duplicate copy of this sheet.  |                         |
| I am the:   |  |                         |
| <input type="checkbox"/>  | Applicant/inventor   |                         |
| <input type="checkbox"/>  | Assignee of record of the entire interest. See 37 CFR 3.71.  |                         |
| <input checked="" type="checkbox"/>   | Attorney or agent of record (Registration No.:   | 39,505 )                |
| <input checked="" type="checkbox"/>   | Attorney or agent under 37 CFR 1.34(a)   |                         |
|   | Registration number if acting under 37 CFR 1.34(a)   | 39,505                  |
| Nov. 29, 2005 Date  |  |                         |
| Signature   |  |                         |
| Barbara R. Doutre   |  |                         |
| Type or printed name  |  |                         |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |  |                         |
| <input checked="" type="checkbox"/>   | Total of 2 form(s) are submitted   |                         |
| CERTIFICATE OF EXPRESS MAILING  |  |                         |
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number 571-273-8300 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on the date listed below: |  |                         |
| Typed or printed name   | Vernice V. Freebourne  | Date: Nov. 29, 2005     |
| Signature   |  |                         |

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